

## Child Covered under Your Plan Lost Eligibility

These qualifying mid-year event election changes are permitted when a child covered under your plan ceases to satisfy eligibility requirements.

### Health Care Coverage:

- You may change your plan. HMO members are required to select a primary care physician.
- You must remove the child who loses eligibility. This usually happens when a child marries, no longer lives at home or away at school, or receives less than one-half of their support from you. It also applies to a step-child who no longer lives with you. The removed child will receive a HIPAA Certificate of Group Health Care Coverage and an Extended Coverage Election Notice (COBRA).

*Warning!* There are serious consequences for *not* removing a family member who is no longer eligible. You may be financially responsible for their claims, you may overpay premiums that cannot be refunded, and you may be excluded from health care coverage for up to three years.

*Note:* A covered child is automatically removed at the end of the year in which they turn Age 23, and your premium is appropriately adjusted. Special rules apply for a child age 23 or older with a qualifying disability.

### Medical Flexible Reimbursement Account:

- You may increase or reduce your election amount to cover a change in eligible medical expenses.

### Dependent Care Flexible Reimbursement Account:

- You may reduce or cancel your election amount to cover a change in eligible dependent care expenses.

### ***Important Things To Know About Making An Election Change Request For This Event***

- 1. What documentation is required.** Documentation validating why the child ceases to be eligible under your plan.
- 2. How to submit the request.** Within 31 days of the last day the child is eligible under your plan, use [EmployeeDirect](#) or complete a paper [Enrollment Form](#).
- 3. When approved changes take effect.** Changes in *health care coverage* are effective the first of the month following the child's loss of coverage under your plan. Changes in *flexible reimbursement accounts* are effective the first of the month following receipt of your request or following the event, whichever is later. When the later date is the first of the month, changes are effective that day.
- 4. Where to learn more.** Visit [www.dhrm.virginia.gov](http://www.dhrm.virginia.gov). The [Employee Benefits link](#) includes answers to frequently asked questions and helpful information about handling a life-

changing event. For more details, contact your agency's Benefits Administrator.

***Reminder:*** If you miss this opportunity to submit your change request, contact your agency's Benefits Administrator immediately.